

**FILED**  
U. S. DISTRICT COURT  
EASTERN DISTRICT OF TEXAS

General Complaint

AUG 23 2021

IN THE UNITED STATES DISTRICT COURT  
FOR THE EASTERN DISTRICT OF TEXAS

BY \_\_\_\_\_  
DEPUTY \_\_\_\_\_

STEVEN ROBERT HAMILTON, INDIVIDUALLY,

AND AS HEIR TO AND REPRESENTATIVE OF THE

ESTATE OF ROBERT MARK HAMILTON

List the full name of each plaintiff in this action.

Case Number : 1:21cv454

VS.

UNITED STATES OF AMERICA

\_\_\_\_\_  
List the full name of each defendant in this action.  
Do not use "et al".

Attach additional pages if necessary.

I. ATTEMPT TO SECURE COUNSEL:

Please answer the following concerning your attempt to secure counsel.

A. In the preparation of this suit, I have attempted to secure the aid of an attorney as follows: (circle one)

1. Employ Counsel
2. Court - Appointed Counsel
3. Lawyer Referral Service of the State Bar of Texas,  
P. O. Box 12487, Austin, Texas 78711.

B. List the name(s) and address(es) of the attorney(s):

BEVERLY A DELHOMME, 3626 N HALL STREET SUITE 610,

DALLAS TX 75219,

SHE SPOKE TO FIVE DIFFERENT ATTORNEYS ON MY BEHALF

C. Results of the conference with counsel:

SHE COULD NOT PURSUE MY CASE AND NO ONE WAS WILLING TO TAKE MY CASE.

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II. List previous lawsuits:

A. Have you filed other lawsuits in state or federal court dealing with the same facts involved in this action or any other incidents?   x   Yes        No

B. If your answer to "A" is "yes", describe the lawsuit in the space below. If there is more than one lawsuit, attach a separate piece of paper describing each.

1. Approximate file date of lawsuit: 11/06/2020

2. Parties to previous lawsuit(s):

**Plaintiff** STEVEN ROBERT HAMILTON, INDIVIDUALLY, AND AS HEIR TO AND REPRESENTATIVE OF THE ESTATE OF STEVEN ROBERT HAMILTON

**Defendant** THE MEDICAL CENTER OF SOUTHEAST TEXAS; MICHAEL LLOYD; MCMAHON JR, M.D.; MID COUNTY MCMAHON JR, M.D.; MID COUNTY MEDICAL GROUP, P.A.

Attach a separate piece of paper for additional plaintiffs or defendants.

3. Identify the court the lawsuit was filed. If federal, name the district. If state, name the county.

IN THE DISTRICT COURT JEFFERSON COUNTY, TEXAS 172ND JUDICIAL DISTRICT

4. Docket number in other court. E-206548

5. Name of judge to whom the case was assigned.  
Honorable Mitch Templeton

6. Disposition: Was the case dismissed, appealed or still pending?

DISMISSED

7. Approximate date of disposition. 03/17/21

III. Parties to this suit:

A. List the full name and address of each plaintiff:

Pla #1 STEVEN ROBERT HAMILTON

317 S HOUSTON

DELEON, TX 76444

Pla #2 STEVEN ROBERT HAMILTON AS HEIR TO AND REPRESENTATIVE OF THE ESTATE OF STEVEN ROBERT HAMILTON

317 S HOUSTON

DELEON TX 76444

B. List the full name of each defendant, their official position, place of employment and full mailing address.

Dft #1: MERRICK GARLAND ATTORNEY GENERAL

UNITED STATES DEPARTMENT OF JUSTICE

950 PENNSYLVANIA AVENUE, NW, WASHINGTON, DC 20530-0001

Dft #2: CIVIL-PROCESS CLERK, UNITED STATES ATTORNEY'S OFFICE

550 FANNIN, SUITE 1250, BEAUMONT TX 77701

Dft #3 FCI BEAUMONT LOW, South Central Region, Federal Bureau of Prisons

U.S. Armed Forces Reserve Complex 344 Marine Forces Drive

Grand Prairie, TX 75051

Attach a separate sheet for additional parties.

**IV: Statement of Claim:**

State as briefly as possible the fact of your case. Describe how each defendant is involved. Include the names of other persons involved with dates and places. Do not give any legal arguments or cite cases or statutes. If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. Use as much space as you need, attaching additional pages if necessary.

SEE ATTACHED PAGE

ROBERT MARK HAMILTON IS THE DECEDENT. DECEDENT HAD CARDIAC

SURGERY ON AUGUST 20, 2018 AT THE MEDICAL CENTER OF SOUTHEAST

TEXAS. DECEDENT WAS DISCHARGED INTO THE CUSTODY OF FCI BEAUMONT

LOW ON AUGUST 24, 2018. DECEDENT THEREAFTER EXPERIENCED CHEST

PAIN, HE WAS NOT PROVIDED MEDICAL TREATMENT NOR GIVEN PRESCRIBED

MEDICATION. AS A RESULT, PLAINTIFF DIED ON AUGUST 30, 2018. DATES AP

SEE ATTACHED PAGE

- V. Relief: State Briefly exactly what you want the court to do for you. Make no legal arguments and do not cite cases or statutes. Attach additional pages if necessary.

COMPENSATION FOR THE LOSS OF MY FATHER;

COMPENSATION FOR MY FATHER'S PAIN;

RULING THAT THE PRISON'S ACTIONS WERE WRONG AND CAUSED

MY FATHER'S DEATH NEEDLESSLY AND CARELESSLY;

COST OF MY FATHER'S FUNERAL AND BURIEL;

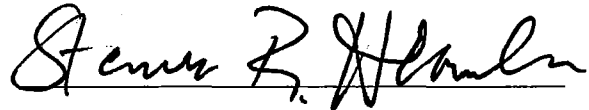
ANYTHING ELSE THE LAW ALLOWS.

Signed this 20 day of AUGUST, 2021.  
(Month) (Year)

  
STEVEN HAMILTON

I declare (certify, verify or state) under penalty of perjury that the foregoing is true and correct.

Executed on: AUGUST 20, 2021  
Date



\_\_\_\_\_  
Signature of each plaintiff

ATTACHMENT TO LAWSUIT:

ROBERT MARK HAMILTON IS THE DECEDENT. DECEDENT HAD CARDIAC SURGERY ON AUGUST 20, 2018 AT THE MEDICAL CENTER OF SOUTHEAST TEXAS. DECEDENT WAS DISCHARGED INTO THE CUSTODY OF FCI BEAUMONT LOW ON AUGUST 24, 2018. DECEDENT THEREAFTER EXPERIENCED CHEST PAIN, HE WAS NOT PROVIDED MEDICAL TREATMENT NOR GIVEN PRESCRIBED MEDICATION. AS A RESULT, PLAINTIFF DIED ON AUGUST 30, 2018. DATES AP

Claimant's, Steven Robert Hamilton, father, Robert Mark Hamilton (RMH) was in the FCI-Low Beaumont unit. On August 17, 2018, RMH developed chest pain and was transported by ambulance to Medical Center of the Southeast TX. On August 20, 2018, RMH had cardiac bypass surgery. RMH's physicians recommended and their discharge orders reflected that RMH needed post-surgery rehabilitation at Mid Jefferson Extended Care. Instead, RMH was transported back to FCI-Low Beaumont. RMH immediately developed chest pain, was not provided competent medical care, was given Motrin, and was not transferred to a medical unit. RMH was not transferred to a medical unit where he could receive the necessary rehabilitation and have the prescribed medication administered. RMH continued to complain of chest pain and fatigue. RMH's cardiac surgery required post-operative medication to keep the 6 arteries that had been repaired patent. Although prescribed, RMH was not given these medications, as indicated by the toxicology results contained in the autopsy report.

Therefore, the 6 vessels re-stenosed, depriving the heart muscles of necessary oxygenated blood supply resulting in a slow and painful death. RMH collapsed on the evening of August 30, 2018. RMH was observed by several inmates who attempted CPR. An hour later, RMH was transported by ambulance to Medical Center of the Southeast TX, wherein he was pronounced dead. RMH's family (emergency contact) was not contacted and informed of his cardiac surgery, his hospitalization, or his death. An inmate, who had been provided a contact phone number by RMH, to use in the event he collapsed, informed the family. What happened to RMH was nothing short of, not only medical malpractice, but a violation of his civil rights. RMH was denied his basic right to appropriate medical care while under the direct supervision of the federal government.

On February 4, 2019, a Freedom of Information (FOIA) request was made to secure the records from FCI-Low Beaumont. Acknowledgement of receipt was received from the U.S. Department of Justice Federal Bureau of Prison in June of 2019. A FOIA request was again submitted June 13, 2019 and followed April 17, 2020. The FOIA website indicates that the request was received in June 2019 and has the status of DAddRvwLog. I did not receive these records until February 4, 2021.

**Steven Robert Hamilton**  
**317 S Houston**  
**DeLeon TX 76444**  
**210-596-7866**

August 20, 2021

**VIA USPS EXPRESS PRIORITY MAIL # EJ 843 042 971 US**  
Beaumont Division  
Jack Brooks Federal Building and United States Courthouse  
300 Willow Street Suite 104  
Beaumont, Texas 77701

**Re: CLAIMANT: Steven Robert Hamilton**  
**DECEASED: Robert Mark Hamilton**  
**PRO SE ORIGINAL COMPLAINT**

Dear District Clerk:

Enclosed please find my Pro Se General Complaint and Cover Sheet along with the sum of Four hundred and two dollars and no cents (\$402.00) to cover the filing fee. Please file this matter and forward to the Beaumont Division. Your assistance is greatly appreciated.

Please feel free to call if you should have any questions.

Sincerely,

  
**Steven Robert Hamilton**  
**Pro Se**

Enclosures

JS 44 (Rev. 04/21)


**CIVIL COVER SHEET**

The JS 44 civil cover sheet and the information contained herein neither replace nor supplement the filing and service of pleadings or other papers as required by law, except as provided by local rules of court. This form, approved by the Judicial Conference of the United States in September 1974, is required for the use of the Clerk of Court for the purpose of initiating the civil docket sheet. (SEE INSTRUCTIONS ON NEXT PAGE OF THIS FORM.)

**I. (a) PLAINTIFFS**

STEVEN ROBERT HAMILTON, INDIVIDUALLY, AND AS  
HEIR TO AND REPRESENTATIVE OF THE ESTATE OF 

(b) County of Residence of First Listed Plaintiff Comanche County  
(EXCEPT IN U.S. PLAINTIFF CASES)

(c) Attorneys (Firm Name, Address, and Telephone Number)  
PRO SE, STEVEN ROBERT HAMILTON  
417 S HOUSTON, DELEON TX 76444  
210-596-7866 

**DEFENDANTS**

UNITED STATES OF AMERICA

County of Residence of First Listed Defendant WASHINGTON DC  
(IN U.S. PLAINTIFF CASES ONLY)

NOTE: IN LAND CONDEMNATION CASES, USE THE LOCATION OF  
THE TRACT OF LAND INVOLVED.

Attorneys (If Known)

MERRICK GARLAND

**II. BASIS OF JURISDICTION** (Place an "X" in One Box Only)

- ☐ 1 U.S. Government Plaintiff ☐ 3 Federal Question (U.S. Government Not a Party)
- ☒ 2 U.S. Government Defendant ☐ 4 Diversity (Indicate Citizenship of Parties in Item III)

**III. CITIZENSHIP OF PRINCIPAL PARTIES** (Place an "X" in One Box for Plaintiff and One Box for Defendant)

- |   | PTF                        | DEF                        |   | PTF                        | DEF                        |
|---|----------------------------|----------------------------|---|----------------------------|----------------------------|
| Citizen of This State                   | <input type="checkbox"/> 1 | <input type="checkbox"/> 1 | Incorporated or Principal Place of Business In This State     | <input type="checkbox"/> 4 | <input type="checkbox"/> 4 |
| Citizen of Another State                | <input type="checkbox"/> 2 | <input type="checkbox"/> 2 | Incorporated and Principal Place of Business In Another State | <input type="checkbox"/> 5 | <input type="checkbox"/> 5 |
| Citizen or Subject of a Foreign Country | <input type="checkbox"/> 3 | <input type="checkbox"/> 3 | Foreign Nation  | <input type="checkbox"/> 6 | <input type="checkbox"/> 6 |

**IV. NATURE OF SUIT** (Place an "X" in One Box Only)

Click here for: [Nature of Suit Code Descriptions.](#)

CONTRACT	TORTS	FORFEITURE/PENALTY	BANKRUPTCY	OTHER STATUTES	
<input type="checkbox"/> 110 Insurance <input type="checkbox"/> 120 Marine <input type="checkbox"/> 130 Miller Act <input type="checkbox"/> 140 Negotiable Instrument <input type="checkbox"/> 150 Recovery of Overpayment & Enforcement of Judgment <input type="checkbox"/> 151 Medicare Act <input type="checkbox"/> 152 Recovery of Defaulted Student Loans (Excludes Veterans) <input type="checkbox"/> 153 Recovery of Overpayment of Veteran's Benefits <input type="checkbox"/> 160 Stockholders' Suits <input type="checkbox"/> 190 Other Contract <input type="checkbox"/> 195 Contract Product Liability <input type="checkbox"/> 196 Franchise	<b>PERSONAL INJURY</b> <input type="checkbox"/> 310 Airplane <input type="checkbox"/> 315 Airplane Product Liability <input type="checkbox"/> 320 Assault, Libel & Slander <input type="checkbox"/> 330 Federal Employers' Liability <input type="checkbox"/> 340 Marine <input type="checkbox"/> 345 Marine Product Liability <input type="checkbox"/> 350 Motor Vehicle <input type="checkbox"/> 355 Motor Vehicle Product Liability <input type="checkbox"/> 360 Other Personal Injury <input checked="" type="checkbox"/> 362 Personal Injury - Medical Malpractice	<input type="checkbox"/> 365 Personal Injury - Product Liability <input type="checkbox"/> 367 Health Care/Pharmaceutical Personal Injury Product Liability <input type="checkbox"/> 368 Asbestos Personal Injury Product Liability <b>PERSONAL PROPERTY</b> <input type="checkbox"/> 370 Other Fraud <input type="checkbox"/> 371 Truth in Lending <input type="checkbox"/> 380 Other Personal Property Damage <input type="checkbox"/> 385 Property Damage Product Liability	<input type="checkbox"/> 625 Drug Related Seizure of Property 21 USC 881 <input type="checkbox"/> 690 Other <b>LABOR</b> <input type="checkbox"/> 710 Fair Labor Standards Act <input type="checkbox"/> 720 Labor/Management Relations <input type="checkbox"/> 740 Railway Labor Act <input type="checkbox"/> 751 Family and Medical Leave Act <input type="checkbox"/> 790 Other Labor Litigation <input type="checkbox"/> 791 Employee Retirement Income Security Act <b>IMMIGRATION</b> <input type="checkbox"/> 462 Naturalization Application <input type="checkbox"/> 465 Other Immigration Actions	<input type="checkbox"/> 422 Appeal 28 USC 158 <input type="checkbox"/> 423 Withdrawal 28 USC 157 <b>INTELLECTUAL PROPERTY RIGHTS</b> <input type="checkbox"/> 820 Copyrights <input type="checkbox"/> 830 Patent <input type="checkbox"/> 835 Patent - Abbreviated New Drug Application <input type="checkbox"/> 840 Trademark <input type="checkbox"/> 880 Defend Trade Secrets Act of 2016 <b>SOCIAL SECURITY</b> <input type="checkbox"/> 861 HIA (1395ff) <input type="checkbox"/> 862 Black Lung (923) <input type="checkbox"/> 863 DIWC/DIWW (405(g)) <input type="checkbox"/> 864 SSID Title XVI <input type="checkbox"/> 865 RSI (405(g)) <b>FEDERAL TAX SUITS</b> <input type="checkbox"/> 870 Taxes (U.S. Plaintiff or Defendant) <input type="checkbox"/> 871 IRS—Third Party 26 USC 7609	<input type="checkbox"/> 375 False Claims Act <input type="checkbox"/> 376 Qui Tam (31 USC 3729(a)) <input type="checkbox"/> 400 State Reapportionment <input type="checkbox"/> 410 Antitrust <input type="checkbox"/> 430 Banks and Banking <input type="checkbox"/> 450 Commerce <input type="checkbox"/> 460 Deportation <input type="checkbox"/> 470 Racketeer Influenced and Corrupt Organizations <input type="checkbox"/> 480 Consumer Credit (15 USC 1681 or 1692) <input type="checkbox"/> 485 Telephone Consumer Protection Act <input type="checkbox"/> 490 Cable/Sat TV <input type="checkbox"/> 850 Securities/Commodities/Exchange <input type="checkbox"/> 890 Other Statutory Actions <input type="checkbox"/> 891 Agricultural Acts <input type="checkbox"/> 893 Environmental Matters <input type="checkbox"/> 895 Freedom of Information Act <input type="checkbox"/> 896 Arbitration <input type="checkbox"/> 899 Administrative Procedure Act/Review or Appeal of Agency Decision <input type="checkbox"/> 950 Constitutionality of State Statutes
<b>REAL PROPERTY</b> <input type="checkbox"/> 210 Land Condemnation <input type="checkbox"/> 220 Foreclosure <input type="checkbox"/> 230 Rent Lease & Ejectment <input type="checkbox"/> 240 Torts to Land <input type="checkbox"/> 245 Tort Product Liability <input type="checkbox"/> 290 All Other Real Property	<b>CIVIL RIGHTS</b> <input type="checkbox"/> 440 Other Civil Rights <input type="checkbox"/> 441 Voting <input type="checkbox"/> 442 Employment <input type="checkbox"/> 443 Housing/Accommodations <input type="checkbox"/> 445 Amer. w/Disabilities - Employment <input type="checkbox"/> 446 Amer. w/Disabilities - Other <input type="checkbox"/> 448 Education	<b>PRISONER PETITIONS</b> <b>Habeas Corpus:</b> <input type="checkbox"/> 463 Alien Detainee <input type="checkbox"/> 510 Motions to Vacate Sentence <input type="checkbox"/> 530 General <input type="checkbox"/> 535 Death Penalty <b>Other:</b> <input type="checkbox"/> 540 Mandamus & Other <input type="checkbox"/> 550 Civil Rights <input type="checkbox"/> 555 Prison Condition <input type="checkbox"/> 560 Civil Detainee - Conditions of Confinement			

**V. ORIGIN** (Place an "X" in One Box Only)

- ☒ 1 Original Proceeding ☐ 2 Removed from State Court ☐ 3 Remanded from Appellate Court ☐ 4 Reinstated or Reopened ☐ 5 Transferred from Another District (specify) ☐ 6 Multidistrict Litigation - Transfer ☐ 8 Multidistrict Litigation - Direct File

**VI. CAUSE OF ACTION**

Cite the U.S. Civil Statute under which you are filing (Do not cite jurisdictional statutes unless diversity):  
FEDERAL TORT CLAIMS ACT 28 U.S.C. SECTIONS 1346(b), 2671-2680 ET SEQ

Brief description of cause:

WRONGFUL DEATH MEDICAL MALPRACTICE, DECEASED SENT TO WRONG UNIT NAD NOT GIVEN POST-OP CARE

**VII. REQUESTED IN COMPLAINT:**

☐ CHECK IF THIS IS A CLASS ACTION UNDER RULE 23, F.R.Cv.P.

DEMAND \$  
\$250,000.00

CHECK YES only if demanded in complaint:  
JURY DEMAND: ☐ Yes ☐ No

**VIII. RELATED CASE(S) IF ANY**

(See instructions):

JUDGE

DOCKET NUMBER

DATE

AUGUST 20, 2021

SIGNATURE OF ATTORNEY OF RECORD



FOR OFFICE USE ONLY

RECEIPT #

AMOUNT

APPLYING IFP

JUDGE

MAG. JUDGE



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Steven R. Hamilton  
317 S Houston  
DeLeon TX 76444

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☐ Sunday/Holiday Delivery Required (additional fee, where available)  
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Beaumont Division  
JACK Brooks Federal Building &  
US Courthouse  
300 Willow Street Suite 104  
Beaumont, TEXAS

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**Date Accepted (MM/DD/YY)** 8-20-21 **Scheduled Delivery Time** 6:00 PM **Insurance Fee** \$ **COD Fee** \$

**Time Accepted** 3:50 ☐ AM ☒ PM **Return Receipt Fee** \$ **Live Animal Transportation Fee** \$

**Special Handling/Fragile** \$ **Sunday/Holiday Premium Fee** \$ **Total Postage & Fees** \$ 26<sup>35</sup>

**Weight** ☒ Flat Rate ☐ Weight **Acceptance Employee Initials** KK

**DELIVERY (POSTAL SERVICE USE ONLY)**

**Delivery Attempt (MM/DD/YY)** **Time** ☐ AM ☐ PM **Employee Signature**

**Delivery Attempt (MM/DD/YY)** **Time** ☐ AM ☐ PM **Employee Signature**

LABEL 11-B, MAY 2021

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**UNITED STATES  
POSTAL SERVICE**